

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mail piece, or on the front if space permits.

1. Article Addressed to:

Donna M. Paul
1003 Laddington Lane
Peachtree City, GA 30269

2. Article Number
(Transfer from serv

7017 2680 0003 1842 2651

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X *DM Paul* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

2107 MC 3370
#16 order
AIR 26 2114

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

February 2008

Domestic Return Receipt

102595-02-M-1540